

4537

PLACE OF BIRTH  
County of Gila  
District of \_\_\_\_\_  
Town of Miami  
or  
City of \_\_\_\_\_

ARIZONA STATE BOARD OF HEALTH  
BUREAU OF VITAL STATISTICS  
ORIGINAL CERTIFICATE OF BIRTH

State Index No. 128  
Co. Register No. 52  
Local Registrar's No. \_\_\_\_\_  
St; \_\_\_\_\_ Ward)

FULL NAME OF CHILD Helen Lorene Plummer { Born } YES  
If child is not named, make Supplemental Report on blank obtainable from local registrar. { Alive } NO

Sex of Child Female { Twin, Triplet or other } and { Number in order of birth } Legiti- macy yes Date of Birth Jan 20 1917  
(Month) (Day) (Yr.)

FATHER  
Full Name Frank Plummer  
Residence Miami, Arizona  
Color or Race White Age at last Birthday 26 (Years)  
Birthplace Minn.  
Occupation Blacksmith helper

MOTHER  
Full Maiden Name Josephine Langford  
Residence Miami, Arizona  
Color or Race White Age at last Birthday 16 (Years)  
Birthplace Oklahoma  
Occupation Housewife

Number of child of this mother 1 Number of Children, of this mother, now living 1 Were precautions taken against Ophthalmia neonatorum? Yes

# CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE\*

I hereby certify that I attended the birth of the above child; and that it occurred on Jan 20 1917, at 9:35 AM.

\*When there is no attending physician or midwife, then the householder should make this return.

(Signature) C. P. Swackhamer, M.D.  
(Attending physician, midwife, householder \*)

Given or Christian name added from a supplemental report \_\_\_\_\_ 1917

Address Miami, Arizona

Filed Jan 4 1917

A True Copy

LOCAL REGISTRAR.

879-120-131  
COUNTY REGISTRAR.

Filed Jan 7 1917

COUNTY REGISTRAR.